

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

-----X

UNITED STATES OF AMERICA,

-against-

CONSENT TO PROCEED BY VIDEO OR
TELE CONFERENCE

13 -CR-580(01) (JMF)

Davon Williams

Defendant(s).

-----X

Defendant Davon Williams hereby
voluntarily consents to participate in the following proceeding via videoconferencing
or x teleconferencing:

 x Initial Appearance Before a Judicial Officer

 Arraignment (Note: If on Felony Information, Defendant Must Sign Separate Waiver of
Indictment Form)

 Bail/Detention Hearing

 Conference Before a Judicial Officer

/s/Davon Williams

Defendant's Signature
(Judge may obtain verbal consent on
Record and Sign for Defendant)

Davon Williams

Print Defendant's Name



Defendant's Counsel's Signature

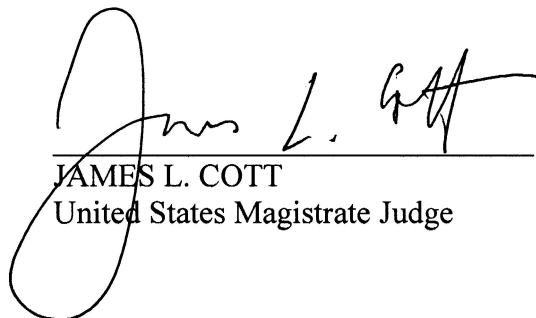
Inga L. Parsons

Print Counsel's Name

This proceeding was conducted by reliable video or telephone conferencing technology.

September 2, 2020

Date



JAMES L. COTT
United States Magistrate Judge

SDNY
CJA 23
(Rev. 3/20)

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT, OR OTHER SERVICES WITHOUT PAYMENT OF FEE

IN THE UNITED STATES ☒ DISTRICT COURT ☐ COURT OF APPEALS ☐ OTHER (Specify below)
IN THE CASE OF

United States v. Davon Williams

FOR
VOSR
AT
SDNY

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

Davon Williams

CHARGE/OFFENSE (describe if applicable & check box →)

VOSR (original offense 21 usc 846)

☒ Felony
☐ Misdemeanor

- 1 ☐ Defendant - Adult
 2 ☐ Defendant - Juvenile
 3 ☐ Appellant
 4 ☐ Probation Violator
 5 ☒ Supervised Release Violator
 5 ☐ Habeas Petitioner
 7 ☐ 2255 Petitioner
 8 ☐ Material Witness
 9 ☐ Other (Specify) _____

DOCKET NUMBERS

Magistrate Judge

District Court

Court of Appeals

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

INCOME & ASSETS	EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Self-Employed																
		Name and address of employer: _____																
		IF YES, how much do you earn per month? \$ _____	IF NO, give month and year of last employment? <u>12/2019</u> How much did you earn per month? \$ <u>1,000.00</u>															
		If married, is your spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No																
		If you are a minor under age 21, what is the approximate monthly income of your parent(s) or guardian(s)? \$ _____																
OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																	
	<table border="0"> <tr> <td></td> <td>RECEIVED</td> <td>SOURCES</td> </tr> <tr> <td>IF YES, give the amount received and identify the sources</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td></td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td></td> <td>\$ _____</td> <td>_____</td> </tr> </table>				RECEIVED	SOURCES	IF YES, give the amount received and identify the sources	\$ _____	_____		\$ _____	_____		\$ _____	_____			
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	\$ _____	_____																
	\$ _____	_____																
CASH	Do you have any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, total amount? \$ _____																	
PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																	
	<table border="0"> <tr> <td></td> <td>VALUE</td> <td>DESCRIPTION</td> </tr> <tr> <td>IF YES, give value and description for each</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td></td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td></td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td></td> <td>\$ _____</td> <td>_____</td> </tr> </table>				VALUE	DESCRIPTION	IF YES, give value and description for each	\$ _____	_____		\$ _____	_____		\$ _____	_____		\$ _____	_____
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OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated or Divorced Total No. of Dependents _____ List persons you actually support and your relationship to them <u>3 kids</u>																
	DEBTS & MONTHLY BILLS (Rent, utilities, loans, charge accounts, etc.)	<table border="0"> <tr> <td>DESCRIPTION</td> <td>TOTAL DEBT</td> <td>MONTHLY PAYMENT</td> </tr> <tr> <td>live with mom</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>food stamps</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td></td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td></td> <td>\$ _____</td> <td>\$ _____</td> </tr> </table>		DESCRIPTION	TOTAL DEBT	MONTHLY PAYMENT	live with mom	\$ _____	\$ _____	food stamps	\$ _____	\$ _____		\$ _____	\$ _____		\$ _____	\$ _____
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I certify under penalty of perjury that the foregoing is true and correct.

/s/Davon Williams

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

FD/CJA/RET. ATTORNEY

(PRINT)

ASSISTANT UNITED STATES ATTORNEY

(PRINT)

☒ APPROVEDJAMES L. COTT
United States Magistrate Judge

SIGNATURE OF JUDICIAL OFFICER

09/02/2020
Date

September 2, 2020

DATE